

# CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
(15)	1												
2		1						51					
3		1						52					
4		1						53					
5		1						54					
6		X 1						55					
7		X 1						56					
8		X 1						57					
9		1						58					
10		1						59					
11		1						60					
12		1						61					
13		X 1						62					
14		1						63					
(15)	1	X						64					
16		1						65					
17		1						66					
18		X 1						67					
19		X 1						68					
20		1						69					
21		1						70					
22		1						71					
23		1						72					
24		1						73					
25		1						74					
26		X 1						75					
27		X 1						76					
28		X 1						77					
29		X 1						78					
30		1						79					
31		1						80					
32		1						81					
33		1						82					
34								83					
35								84					
36								85					
37								86					
38								87					
39								88					
40								89					
41								90					
42								91					
43								92					
44								93					
45								94					
46								95					
47								96					
48								97					
49								98					
50								99					
Total Indep	2							100					
Total Depend	31							Total Indep					
Total Claims	33							Total Depend					
								Total Claims					